

APPLICATION FORMS

Instructions for Using Fill-in PDF Application Forms

To access a PDF file, you will need the free Adobe Acrobat Reader or Acrobat Approval software. The free Acrobat Reader software is available at Adobe's web site at www.adobe.com. Acrobat Approval can be purchased for \$39 through the Adobe web site. **CAUTION: Please note that the free Adobe Acrobat Reader does not allow you to save your completed forms. You can save your completed forms if you use Acrobat Approval.**

If you are using the free Acrobat Reader: Before you start to fill out a form, please make sure that you have all the correct, final information available. You may wish to print the forms first, fill them out by hand, and ensure their accuracy before filling in the final forms on your computer. **Since Adobe Acrobat Reader does not allow you to save the form once it is filled out,** you will be unable to go back and edit your completed form after you close the window containing your form. With multi-page documents, you may want to print each page as you complete it.

If you are using Acrobat Approval: You can save, close, and reopen a form as you would a conventional word processing document.

Please note that currently there is no computation, validation, or verification of the information you enter. Form fields simply allow you to type in information; you must ensure it is correct.

To complete the forms:

1. If your cursor is not already in the shape of a "hand," select the "hand" tool from the Acrobat toolbar menu. This will allow you to move the page around to see each portion.
2. Move the "hand" pointer over a form box on the document. The "hand" should turn into an "I-beam." The "I-beam" signifies a "fill-in" section of the form. Click inside the box. You can now type into the box. When the pointer hovers over a check box, button, or item list, it will turn into a hand with one finger pointing. This means you can select the item.
3. To move from field to field, use the Tab key. Shift + Tab will move you to the previous field.
4. Fill out the form by typing text into the appropriate areas and checking boxes where needed. (Boxes can be checked either by clicking on the box with your mouse or by tabbing into the box and hitting the "enter" key.)
5. Print the form using the "print" icon in the Acrobat toolbar menu, not the print icon or command in your web browser. If you print using your web browser's print command instead of the Acrobat command, the contents of the fields might not print properly.
6. Check the printed forms very carefully for any errors, fields that did not print, or omissions. You may go back and make changes to any of the fields in your open document and then reprint it.

Literature Fellowship Application

Individual Application

Read the
instructions on
facing page before
you start.

OMB No. 3135-0112
Expires 02/28/05
W

This is 10 point type; use type at least this large when completing this form

Is this your first application to the Arts Endowment? ☐ No ☐ Yes

If no, please check here if your name or address has changed since your last application: ☐

Have you received a federal grant before? ☐ No ☐ Yes

1. Legal Name: ☐ Mr. ☐ Ms. First: Last:

If applicable, Pen Name: ☐ Mr. ☐ Ms. First: Last:

2. Permanent Address: Present Address:

ZIP Code (9-digit number):

ZIP Code (9-digit number):

3. Category under which support is requested (check one):

Fellowships for Creative Writers (5211-11)

For FY 2004: ☐ Fiction ☐ Creative Nonfiction

For FY 2005: ☐ Poetry

Translation Projects (5211-12)

For FY 2004: ☐ Prose ☐ Drama

For FY 2005: ☐ Poetry ☐ Verse Drama

Is your translation project a: ☐ Collaboration ☐ Retranslation

Specify language:

4. Period of Support (e.g., 02/01/04 to 06/30/05): / / to: / /

5. Birth Date (use 2-digit numerals): / /

6. U.S. Citizenship: ☐ Yes ☐ No If Permanent Resident, Visa #:

7. Present Employment

Employer:

Position/Occupation:

8. Certification

I certify that the information contained in this application, including all attachments and supporting material, is true and correct to the best of my knowledge. I also certify that I am in compliance with the federal requirements specified under "Assurance of Compliance" on pages 29-30.

☐ Mr. ☐ Ms. First: Last:

Signature (must agree with legal name in #1): Date: / /

Day Telephone: () ext. Evening Telephone: ()

E-mail: Fax: ()



NOTE: Application forms that can be filled out on a computer are available in the Literature Fellowships section of Apply for a Grant on our Web site at www.arts.gov.

The following items on the form on the opposite page may require clarification.

1. **Name:** Applicants using pen names must list their legal name first on the application. All transactions with the Arts Endowment must be made using the legal name.
2. **Address:** Correspondence concerning the application process will be sent to your "Present Address." Notice of fellowship award or rejection will be sent to your "Permanent Address." You must notify us of any change in either address. If you do not know your 9-digit ZIP Code (also known as "ZIP + 4 Code") you may look it up at <http://www.usps.com/zip4/>.
3. **Category Under Which Support is Requested:** If you choose "Translation Projects," note if this is a collaborative project or a retranslation. Specify the language of the work to be translated.
4. **Period of Support Requested:**

Fellowships for Creative Writers: A Prose fellowship must be scheduled to begin between January 1, 2004, and January 1, 2005, and may extend up to two years. A Poetry fellowship must be scheduled to begin between January 1, 2005, and January 1, 2006, and may extend up to two years.

Translation Projects: A Prose fellowship must be scheduled to begin between November 1, 2003, and November 1, 2004, and may extend up to two years. A Poetry fellowship must be scheduled to begin between November 1, 2004, and November 1, 2005, and may extend up to two years.

Literature Fellowship Application
Individual Application (continued)

Read the
instructions on
facing page before
you start.

OMB No. 3135-0112
Expires 02/28/05
PDF

This is 10 point type; use type at least this large when completing this form

Applicant (legal name):

9. Description of Fellowship Activity: Complete in the space that is provided. Do not continue on additional pages.

10. Summary of Publications/Productions to document your eligibility. Attach one additional sheet if necessary.

TITLES (UNDERLINE TITLES)	NAME OF MAGAZINE, PRESS, OR PRODUCING COMPANY (INCLUDE CITY & STATE)	PUBLICATION/PRODUCTION DATE(S) AND THE # OF PAGES

11. Education:

NAME OF INSTITUTION	MAJOR AREA OF STUDY	INCLUSIVE DATES	DEGREE

12. Fellowships or grants previously awarded:

NAME OF AWARD	AREA OF STUDY	INCLUSIVE DATES	AMOUNT

13. Prizes/Honors received:

14. Membership/professional societies:



The following items on the form on the opposite page may require clarification.

9. Description of Fellowship Activity:

Fellowships for Creative Writers: Describe how you see your work being advanced by this fellowship; this may include writing, research, travel, etc. Complete in the space that is provided. Do not continue on additional pages.

Translation Projects: Briefly describe the proposed project including author(s), title(s), language, and length of material. In addition, explain why it is important that the work be translated. Complete in the space that is provided. Do not continue on additional pages.

10. Summary of Publications/Productions to document your eligibility:

Fellowships for Creative Writers: In the space that is provided, list the specific published works that establish your eligibility. (See “Eligibility” on pages 4-5.) Note the titles, publishers, publication dates, and the number of pages of material. Please underline the titles of books. One additional page may be attached.

Translation Projects: In the space that is provided, list the specific published translations into English that establish your eligibility. (See “Eligibility” on pages 12-13.) Note the titles, authors, publishers, the number of pages which you translated in each publication, publication dates, and the number of pages of material. Please underline the titles of books, plays, or verse drama. One additional page may be attached.

If your eligibility is based on the production of your translation of at least one full-length play or verse drama, note the title, author, producing company, location, and dates for each production.

Literature Fellowship Application

Application Checklist

Please complete the checklist below to ensure that you have included all required material in your application package. This is solely for your own use. This checklist does NOT need to be included in your application package. Incomplete applications will be rejected.

FELLOWSHIPS FOR CREATIVE WRITERS

- ☐ Application Acknowledgment Card
- ☐ Individual Application Form (one set with original signatures and two copies)

Manuscript Material:

- ☐ FY 2004/Prose, 20-30 pages of sample text (9 copies)
- ☐ FY 2005/Poetry, 10 pages of poetry (9 copies)
- ☐ Cover page (one copy)
- ☐ Proof of Eligibility for each publication listed (one copy)

TRANSLATION PROJECTS

- ☐ Application Acknowledgment Card
- ☐ Individual Application Form (one set with original signatures and two copies)
- ☐ Applicant's Resume/Narrative (4 copies)

If a collaboration:

- ☐ Collaborator's Resume (4 copies)
- ☐ Co-signed Statement of Agreement (one copy)
- ☐ Resume of Author(s) to be translated (4 copies)
- ☐ Description of work to be translated (4 copies)
- ☐ If a retranslation, justification of need (4 copies)
- ☐ Verification of rights (one copy)

Manuscript Material:

- ☐ 10-20 page sample of your translation (9 copies)
- ☐ Original work which your sample translation renders (9 copies)
- ☐ For retranslations, existing translations of above sample (9 copies)
- ☐ For an excerpt from a novel, play, verse drama, or other long work, one-page precis (9 copies)
- ☐ Proof of Eligibility for each publication listed (one copy)
 - ☐ If the production of a play or verse drama is used to establish eligibility, proof that your translation of the play was produced by a professional theater company

Assurance of Compliance

By signing the application form, the Applicant certifies that he or she is in compliance with the statutes outlined below and all related Arts Endowment regulations and will maintain records and submit the reports that are necessary to determine compliance.

1. Nondiscrimination Statutes

The Applicant certifies that he or she does not discriminate:

- On the grounds of race, color, or national origin (including limited English proficiency), in accordance with [Title VI of the Civil Rights Act of 1964](#), as amended (42 U.S.C. 2000d et seq.).
- On the grounds of disability, in accordance with [Section 504 of the Rehabilitation Act of 1973](#) (29 U.S.C. 794) and the [Americans with Disabilities Act of 1990](#) ("ADA") (42 U.S.C. 12101-12213). The ADA's requirements apply regardless of whether you receive federal funds.
- On the basis of age, in accordance with the [Age Discrimination Act of 1975](#) (42 U.S.C. 6101 et seq.).
- On the basis of sex, in any education program or activity, in accordance with [Title IX of the Education Amendments of 1972](#) (20 U.S.C. 1681 et seq.).

For further information and copies of the nondiscrimination regulations identified above, contact the Endowment's Office of Civil Rights at 202/682-5454 or 202/682-5695 Voice/T.T., or link to them through our Web site at www.arts.gov. For inquiries about limited English proficiency, go to <http://www.lep.gov> or contact the Office of General Counsel at ogc@arts.endow.gov or 202/682-5418.

2. [Regulations relating to Debarment and Suspension](#) (45 C.F.R. pt. 1154) in which the Applicant certifies that he or she is not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in covered transactions by any federal department or agency, nor

Has, within the three years preceding the submission of this application, been convicted of or had a civil judgment rendered against him or her for commission of fraud or a criminal offense in connection with a public (federal, state, or local) transaction or a contract under a public transaction; for violation of federal or state antitrust statutes; for commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property; had any public transactions terminated for cause or default; or is

presently indicted for or otherwise criminally or civilly charged by a governmental entity with any of the preceding offenses.

3. **Federal Debt Status** (OMB Circular A-129). The applicant certifies that he or she is not delinquent in the repayment of any federal debt, or if he or she is, provides explanatory information. Examples of relevant debt include student loans, delinquent payroll or other taxes, audit disallowances, and benefit overpayments.
4. [The Drug-Free Workplace Act of 1988](#) (41 U.S.C. 701 et seq. and 45 C.F.R. pt. 1154)

The Applicant certifies that:

- (a) **If awarded a grant, he or she will not engage in** the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any grant activity. (For the purposes of this Act, alcohol is not considered a controlled substance.)
- (b) **If convicted of a criminal drug offense** that is the result of a violation occurring during the conduct of any grant activity, he or she will report the conviction to the Arts Endowment's Grants & Contracts Officer, in writing, within ten calendar days of the conviction. This notice must include the grant number of each affected grant.

Reporting Burden

The public reporting burden for this collection of information is estimated at an average of 12 hours per response including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The Arts Endowment welcomes any suggestions that you might have on improving the guidelines and making them as easy to use as possible. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Office of Guidelines & Panel Operations, Room 516, National Endowment for the Arts, Nancy Hanks Center, 1100 Pennsylvania Avenue, NW, Washington, DC 20506-0001. Note: Applicants are not required to respond to the collection of information unless it displays a currently valid U.S. Office of Management and Budget (OMB) control number.